

PHA Plans

Streamlined Annual Version

U.S. Department of Housing and
Urban Development
Office of Public and Indian
Housing

OMB No. 2577-0226
(exp. 08/31/2009)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937 that introduced 5-year and annual PHA Plans. The full PHA plan provides a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form allows eligible PHAs to make a streamlined annual Plan submission to HUD consistent with HUD's efforts to provide regulatory relief for certain types of PHAs. Public reporting burden for this information collection is estimated to average 11.7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Information in PHA plans is publicly available.

Streamlined Annual PHA Plan

for Fiscal Year: **2009**

PHA Name:

**Housing Authority of the City of
Sikeston**

NOTE: This PHA Plan template (HUD-50075-SA) is to be completed in accordance with instructions contained in previous Notices PIH 99-33 (HA), 99-51 (HA), 2000-22 (HA), 2000-36 (HA), 2000-43 (HA), 2001-4 (HA), 2001-26 (HA), 2003-7 (HA), and any related notices HUD may subsequently issue.

Streamlined Annual PHA Plan Agency Identification

PHA Name: Housing Authority of the City of Sikeston

PHA Number: MO008

PHA Fiscal Year Beginning: 01/2009

PHA Programs Administered:

☒ **Public Housing and Section 8** ☐ **Section 8 Only** ☐ **Public Housing Only**

Number of public housing units: 245

Number of S8 units:

Number of public housing units:

Number of S8 units: Baseline: 496 / Units Leased: 351 (as of October 1, 2008)

☐ **PHA Consortia:** (check box if submitting a joint PHA Plan and complete table)

Participating PHAs	PHA Code	Program(s) Included in the Consortium	Programs Not in the Consortium	# of Units Each Program
Participating PHA 1:				
Participating PHA 2:				
Participating PHA 3:				

PHA Plan Contact Information:

Name: Bobby K. Henry

Phone: 573-471-3012

TDD: 1-800-545-1833 Ext. 890

Email: spha@charterinternet.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

☒ PHA's main administrative office ☐ PHA's development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plan revised policies or program changes (including attachments) are available for public review and inspection. ☒ Yes ☐ No.

If yes, select all that apply:

- ☒ Main administrative office of the PHA
☐ PHA development management offices
☐ Main administrative office of the local, county or State government
☐ Public library ☐ PHA website ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA ☐ PHA development management offices
☐ Other (list below)

Streamlined Annual PHA Plan
Fiscal Year 2009
[24 CFR Part 903.12(c)]

Table of Contents

[24 CFR 903.7(r)]

Provide a table of contents for the Plan, including applicable additional requirements, and a list of supporting documents available for public inspection.

A. PHA PLAN COMPONENTS	PAGE
-------------------------------	-------------

<input type="checkbox"/> 1. Site-Based Waiting List Policies 903.7(b)(2) Policies on Eligibility, Selection, and Admissions	
<input checked="" type="checkbox"/> 2. Capital Improvement Needs	5
903.7(g) Statement of Capital Improvements Needed	
<input type="checkbox"/> 3. Section 8(y) Homeownership 903.7(k)(1)(i) Statement of Homeownership Programs	
<input type="checkbox"/> 4. Project-Based Voucher Programs	
<input checked="" type="checkbox"/> 5. PHA Statement of Consistency with Consolidated Plan.	7
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B. ATTACHMENTS

□ FY 2007 Capital Fund Program Performance & Evaluation Report	18
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□ Violence Against Women Act (VAWA) Policy	26

C. SEPARATE HARD COPY SUBMISSIONS TO LOCAL HUD FIELD OFFICE

Form HUD-50076, *PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the Streamlined Annual Plan* identifying policies or programs the PHA has revised since submission of its last Annual Plan, and including Civil Rights certifications and assurances the changed policies were presented to the Resident Advisory Board for review and comment, approved by the PHA governing board, and made available for review and inspection at the PHA's principal office;

For PHAs Applying for Formula Capital Fund Program (CFP) Grants:

Form HUD-50070, *Certification for a Drug-Free Workplace*;

Form HUD-50071, *Certification of Payments to Influence Federal Transactions*; and

Form SF-LLL & SF-LLLa, *Disclosure of Lobbying Activities*.

1. Site-Based Waiting Lists (Eligibility, Selection, Admissions Policies)

[24 CFR Part 903.12(c), 903.7(b)(2)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Site-Based Waiting Lists-Previous Year

1. Has the PHA operated one or more site-based waiting lists in the previous year? If yes, complete the following table; if not skip to B. **NO**

Site-Based Waiting Lists				
Development Information: (Name, number, location)	Date Initiated	Initial mix of Racial, Ethnic or Disability Demographics	Current mix of Racial, Ethnic or Disability Demographics since Initiation of SBWL	Percent change between initial and current mix of Racial, Ethnic, or Disability demographics

2. What is the number of site based waiting list developments to which families may apply at one time?
3. How many unit offers may an applicant turn down before being removed from the site-based waiting list?
4. ☐ Yes ☐ No: Is the PHA the subject of any pending fair housing complaint by HUD or any court order or settlement agreement? If yes, describe the order, agreement or complaint and describe how use of a site-based waiting list will not violate or be inconsistent with the order, agreement or complaint below:

B. Site-Based Waiting Lists – Coming Year

If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to next component. **NO**

1. How many site-based waiting lists will the PHA operate in the coming year?
2. ☐ Yes ☐ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
If yes, how many lists?
3. ☐ Yes ☐ No: May families be on more than one list simultaneously

If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?

- ☐ PHA main administrative office
☐ All PHA development management offices
☐ Management offices at developments with site-based waiting lists
☐ At the development to which they would like to apply
☐ Other (list below)

2. Capital Improvement Needs

[24 CFR Part 903.12 (c), 903.7 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. Capital Fund Program

1. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete items 7 and 8 of this template (Capital Fund Program tables). If no, skip to B.
2. ☐ Yes ☒ No: Does the PHA propose to use any portion of its CFP funds to repay debt incurred to finance capital improvements? If so, the PHA must identify in its annual and 5-year capital plans the development(s) where such improvements will be made and show both how the proceeds of the financing will be used and the amount of the annual payments required to service the debt. (Note that separate HUD approval is required for such financing activities.).

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

1. ☐ Yes ☒ No: Has the PHA received a HOPE VI revitalization grant? (if no, skip to #3; if yes, provide responses to the items on the chart located on the next page, copying and completing as many times as necessary).
2. Status of HOPE VI revitalization grant(s):

HOPE VI Revitalization Grant Status

a. Development Name:

b. Development Number:

c. Status of Grant:

- ☐ Revitalization Plan under development
☐ Revitalization Plan submitted, pending approval
☐ Revitalization Plan approved
☐ Activities pursuant to an approved Revitalization Plan underway

3. ☐ Yes ☒ No: Does the PHA expect to apply for a HOPE VI Revitalization grant in the Plan year?

If yes, list development name(s) below:

4. ☐ Yes ☒ No: Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

5. ☐ Yes ☒ No: Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

3. Section 8 Tenant Based Assistance--Section 8(y) Homeownership Program
(if applicable) [24 CFR Part 903.12(c), 903.7(k)(1)(i)]

1. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to the next component; if "yes", complete each program description below (copy and complete questions for each program identified.)

2. Program Description:

a. Size of Program

☐ Yes ☐ No: Will the PHA limit the number of families participating in the Section 8 homeownership option?

If the answer to the question above was yes, what is the maximum number of participants this fiscal year?

b. PHA-established eligibility criteria

☐ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria:

c. What actions will the PHA undertake to implement the program this year (list)?

3. Capacity of the PHA to Administer a Section 8 Homeownership Program:

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent of purchase price and requiring that at least 1 percent of the purchase price comes from the family's resources.
- ☐ Requiring that financing for purchase of a home under its Section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards.
- ☐ Partnering with a qualified agency or agencies to administer the program (list name(s) and years of experience below):
- ☐ Demonstrating that it has other relevant experience (list experience below):

4. Use of the Project-Based Voucher Program

Intent to Use Project-Based Assistance

☐ Yes ☒ No: Does the PHA plan to "project-base" any tenant-based Section 8 vouchers in the coming year? If the answer is "no," go to the next component. If yes, answer the following questions.

1. ☐ Yes ☐ No: Are there circumstances indicating that the project basing of the units, rather than tenant-basing of the same amount of assistance is an appropriate option? If yes, check which circumstances apply:
 - ☐ low utilization rate for vouchers due to lack of suitable rental units
 - ☐ access to neighborhoods outside of high poverty areas
 - ☐ other (describe below:)
2. Indicate the number of units and general location of units (e.g. eligible census tracts or smaller areas within eligible census tracts):

5. PHA Statement of Consistency with the Consolidated Plan

[24 CFR Part 903.15]

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary) only if the PHA has provided a certification listing program or policy changes from its last Annual Plan submission.

1. Consolidated Plan jurisdiction: [State of Missouri](#)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☒ The PHA has based its statement of needs of families on its waiting lists on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☒ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☐ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)
- ☐ Other: (list below)

3. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

- ☐ Maintain the supply of decent, safe and sanitary rental housing that is affordable for low, very low, and moderate income families.

6. Supporting Documents Available for Review for Streamlined Annual PHA Plans

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
YES	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Standard Annual, Standard Five-Year, and Streamlined Five-Year/Annual Plans;</i>	5 Year and Annual Plans
YES	<i>PHA Certifications of Compliance with the PHA Plans and Related Regulations and Board Resolution to Accompany the Streamlined Annual Plan</i>	Streamlined Annual Plans
YES	<i>Certification by State or Local Official of PHA Plan Consistency with Consolidated Plan.</i>	5 Year and standard Annual Plans
YES	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
YES	Housing Needs Statement of the Consolidated Plan for the jurisdiction(s) in which the PHA is located and any additional backup data to support statement of housing needs for families on the PHA’s public housing and Section 8 tenant-based waiting lists.	Annual Plan: Housing Needs
YES	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
YES	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP] and the Site-Based Waiting List Procedure.	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Deconcentration Income Analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Any policy governing occupancy of Police Officers and Over-Income Tenants in Public Housing. <input checked="" type="checkbox"/> Check here if included in the public housing A&O Policy.	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
YES	Public housing rent determination policies, including the method for setting public housing flat rents. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
YES	Schedule of flat rents offered at each public housing development. <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Rent Determination
YES	Section 8 rent determination (payment standard) policies (if included in plan, not necessary as a supporting document) and written analysis of Section 8 payment standard policies. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Rent Determination
YES	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation).	Annual Plan: Operations and Maintenance
YES	Results of latest Public Housing Assessment System (PHAS) Assessment (or other applicable assessment).	Annual Plan: Management and Operations
N/A	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
		Sufficiency
YES	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
N/A	Any policies governing any Section 8 special housing types <input type="checkbox"/> Check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
YES	Public housing grievance procedures <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
YES	Section 8 informal review and hearing procedures. <input checked="" type="checkbox"/> Check here if included in Section 8 Administrative Plan.	Annual Plan: Grievance Procedures
YES	The Capital Fund/Comprehensive Grant Program Annual Statement /Performance and Evaluation Report for any active grant year.	Annual Plan: Capital Needs
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants.	Annual Plan: Capital Needs
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing.	Annual Plan: Capital Needs
YES	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing Section 504 of the Rehabilitation Act and the Americans with Disabilities Act. See PIH Notice 99-52 (HA).	Annual Plan: Capital Needs
YES	Approved or submitted applications for demolition and/or disposition of public housing.	Annual Plan: Demolition and Disposition
YES	Approved or submitted applications for designation of public housing (Designated Housing Plans).	Annual Plan: Designation of Public Housing
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937.	Annual Plan: Conversion of Public Housing
YES	Documentation for required Initial Assessment and any additional information required by HUD for Voluntary Conversion.	Annual Plan: Voluntary Conversion of Public Housing
N/A	Approved or submitted public housing homeownership programs/plans.	Annual Plan: Homeownership
N/A	Policies governing any Section 8 Homeownership program (Section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
YES	Public Housing Community Service Policy/Programs <input checked="" type="checkbox"/> Check here if included in Public Housing A & O Policy	Annual Plan: Community Service & Self-Sufficiency
YES	Cooperative agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies.	Annual Plan: Community Service & Self-Sufficiency
N/A	FSS Action Plan(s) for public housing and/or Section 8.	Annual Plan: Community Service & Self-Sufficiency
YES	Section 3 documentation required by 24 CFR Part 135, Subpart E for public housing.	Annual Plan: Community Service & Self-Sufficiency
N/A	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports for public housing.	Annual Plan: Community Service & Self-Sufficiency
YES	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G). <input checked="" type="checkbox"/> Check here if included in the public housing A & O Policy.	Annual Plan: Pet Policy
YES	The results of the most recent fiscal year audit of the PHA conducted under the Single Audit Act as implemented by OMB Circular A-133, the results of that audit and the PHA's response to any findings.	Annual Plan: Annual Audit
YES	Other supporting documents: Records Retention Policy, Violence Against Women Act (VAWA) Policy, Internal Control Policy	Annual Plan: Management and Operations
N/A	Consortium agreement(s) and for Consortium Joint PHA Plans <u>Only</u> : Certification that consortium agreement is in compliance with 24 CFR Part 943 pursuant to an opinion of counsel on file and available for inspection.	Joint Annual PHA Plan for Consortia: Agency Identification and Annual Management and Operations

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: SIKESTON HOUSING AUTHORITY P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-09 Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2009
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	30,000.00			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	28,800.00			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	288,000.00			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	39,009.00			
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	385,809.00			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation	22,134.00			

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

**Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages**

[illegible]

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

[illegible]

[illegible]

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan					
Part I: Summary					
PHA Name: SIKESTON HOUSING AUTHORITY				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/ Name / HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: MO36-P008-501-10 PHA FY: FY 2010	Work Statement for Year 3 FFY Grant: MO36-P008-501-11 PHA FY: FY 2011	Work Statement for Year 4 FFY Grant: MO36-P008-501-12 PHA FY: FY 2012	Work Statement for Year 5 FFY Grant: MO36-P008-501-13 PHA FY: FY 2013
	Annual Statement				
MO8-1		212,000	39,000	99,000	70,490
MO8-2			124,000	39,200	29,260
MO8-3		59,009	164,009	84,609	161,639
MO8-7		56,000		104,200	18,620
PHA WIDE		58,800	58,800	58,800	105,800
CFP Funds Listed for 5-year planning		385,809	385,809	385,809	385,809
Replacement Housing Factor Funds		0	0	0	0

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

form **HUD-50075-SA** (04/30/2003)

8. Capital Fund Program Five-Year Action Plan

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities					
Activities for Year: 4 FFY Grant: MO36-P008-501-12 PHA FY: FY 2012			Activities for Year: 5 FFY Grant: MO36-P008-501-13 PHA FY: FY 2013		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
MO8-1	ENERGY STAR CFL/LED Light Fixtures- 672	67,200	MO8-1	ENERGY STAR Refrigerators - 106	42,400
	Furnace Room Doors w/Locks – 106	31,800		Purchase Gas Ranges - 106	28,090
			MO8-2	ENERGY STAR Refrigerators - 44	17,600
MO8-2	ENERGY STAR CFL/LED Light Fixtures – 260	26,000		Purchase Gas Ranges - 44	11,660
	Furnace Room Doors w/Locks - 44	13,200	MO8-3	ENERGY STAR Refrigerators - 67	26,800
				Purchase Gas Ranges – 67	17,755
MO8-3	ENERGY STAR CFL/LED Light Fixtures - 318	31,800		Merge 28 0-Bedroom Units	70,000
	Furnace Room Doors w/Locks - 22	6,600		Add 220V Outlet in Living Room	37,500
	Reconstruct 4 Parking Lots – 38,660 Sq Ft	46209		Site Grading for Drainage	9,584
			MO8-7	ENERGY STAR Refrigerators – 28	11,200
MO8-7	ENERGY STAR CFL/LED Light Fixtures - 158	15,800		Purchase Gas Ranges - 28	7,420
	Furnace Room Doors w/Locks – 28	8,400	PHA Wide	Allocation of Administrative Salaries	30,000
	Re-Roof Development – 356 SQ	80,000		CFP Coordinator	28,800
				Telephone System w/Voicemail/Paging	15,000
PHA WIDE	Allocation of Administrative Salaries	30,000		Purchase Computer Software/Hardware	1,000
	CFP Coordinator	28,800		Upgrade SHA Plans, Policies, & Procedures	1,000
				Purchase Vehicle (1-Public Housing)	15,000
				Purchase Vehicle (1-Maintenance)	15,000
Total CFP Estimated Cost		\$385,809			\$385,809

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: SIKESTON HOUSING AUTHORITY P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-07 Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	30,000.00	30,079.00	30,079.00	7,519.74
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	28,800.00	29,395.75	29,220.25	14,995.75
8	1440 Site Acquisition				
9	1450 Site Improvement	35,000.00	54,500.00	54,500.00	54,500.00
10	1460 Dwelling Structures	245,714.00	251,309.58	243,559.32	9,661.55
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	19,026.00	4,976.42	4,976.42	4,976.42
13	1475 Nondwelling Equipment	20,000.00	8,279.25	0.00	0.00
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	378,540.00	378,540.00	362,334.99	91,653.46
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: SIKESTON HOUSING AUTH P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	ADMINISTRATIVE	1410		30,000.00	30,079.00	30,079.00	7,519.74	
	Proration of Administrative Salaries	1410	7.9%	30,000.00	30,079.00	30,079.00	7,519.74	25% Complete
PHA WIDE	FEES AND COSTS	1430		28,800.00	29,395.75	29,220.25	14,995.75	
	Capital Fund Coordinator	1430	100%	28,800.00	28,800.00	28,624.50	14,400.00	50% Complete
	Bid Advertisements	1430	LS	0.00	595.75	595.75	595.75	100% Complete
MO8-2	SITE IMPROVEMENTS	1450		35,000.00	54,500.00	54,500.00	54,500.00	
	Landscape/Trim Trees	1450	36	35,000.00	54,500.00	54,500.00	54,500.00	100% Complete
MO8-1	DWELLING STRUCTURES	1460		39,750.00	44,274.00	44,274.00	3,000.00	
	New Water Heaters	1460	106	39,750.00	44,274.00	44,274.00	3,000.00	7% Complete
MO8-2	DWELLING STRUCTURES	1460		16,500.00	18,425.00	18,425.00	0.00	
	New Water Heaters	1460	44	16,500.00	18,425.00	18,425.00	0.00	Under Contract.

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: SIKESTON HOUSING AUTH P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-07 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MO8-3	DWELLING STRUCTURES	1460		189,464.00	188,610.58	180,860.32	6,661.55	
	New Water Heaters	1460	76	28,125.00	31,301.00	31,301.00	0.00	Under Contract
	Re-Roofing Development	1460	675 SQ	161,339.00	150,648.03	142,897.77	0.00	Under Contract
	Conversion/Merging Units	1460	4 DU	0.00	6,661.55	6,661.55	6,661.55	100% Complete
MO8-3	NON DWELLING STRUCTURES	1470		19,026.00	4,976.42	4,976.42	4,976.42	Carry Over 501-06
	Office & Senior Citizens Bld. Rehab.	1470	1	19,026.00	4,976.42	4,976.42	4,976.42	100% Complete
PHA WIDE	NON DWELLING EQUIPMENT	1475		20,000.00	8,279.25	0.00	0.00	
	New Riding Lawn Mower	1475	1	20,000.00	8,279.25	0.00	0.00	Bidding Process

[illegible]

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary					
PHA Name: SIKESTON HOUSING AUTHORITY P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-06 Replacement Housing Factor Grant No:		Federal FY of Grant: FY 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 06/30/2008 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration	35,000.00	27,899.00	27,899.00	27,899.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	26,400.00	29,112.00	29,112.00	29,112.00
8	1440 Site Acquisition				
9	1450 Site Improvement	162,868.00	137,512.00	137,512.00	137,512.00
10	1460 Dwelling Structures	20,000.00	61,312.65	61,312.65	54,210.42
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	97,486.00	142,473.58	142,473.58	142,473.58
13	1475 Nondwelling Equipment	20,000.00	0.00	0.00	0.00
14	1485 Demolition	10,000.00	4,897.77	4,897.77	4,547.77
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	371,754.00	403,207.00	403,207.00	395,754.77
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation				

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: SIKESTON HOUSING AUTH P.O Box 829 Sikeston, Missouri 63801-0829		Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA WIDE	ADMINISTRATIVE	1410		35,000.00	27,899.00	27,899.00	27,899.00	
	Proration of Administrative Salaries	1410	6.9%	35,000.00	27,899.00	27,899.00	27,899.00	100% Complete
PHA WIDE	FEES AND COSTS	1430		26,400.00	29,112.00	29,112.00	29,112.00	
	Capital Fund Coordinator	1430	100%	26,400.00	28,800.00	28,800.00	28,800.00	100% Complete
	Bid Advertisements	1430	LS	0.00	312.00	312.00	312.00	100% Complete
MO8-1	SITE IMPROVEMENTS	1450		76,540.00	60,372.00	60,372.00	60,372.00	
	Landscape/Trim Trees	1450	74	76,540.00	60,372.00	60,372.00	60,372.00	100% Complete
MO8-2	SITE IMPROVEMENTS	1450		31,960.00	28,772.00	28,772.00	28,772.00	
	Landscape/Trim Trees	1450	35	31,960.00	28,772.00	28,772.00	28,772.00	100% Complete
MO8-3	SITE IMPROVEMENTS	1450		54,368.00	48,368.00	48,368.00	48,368.00	
	Landscape/Trim Trees	1450	59	54,368.00	48,368.00	48,368.00	48,368.00	100% Complete

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: SIKESTON HOUSING AUTH P.O Box 829 Sikeston, Missouri 63801-0829		Grant Type and Number Capital Fund Program Grant No: MO36-P008-501-06 Replacement Housing Factor Grant No:			Federal FY of Grant: FY 2006			
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
MO8-1	DWELLING STRUCTURES	1460		0.00	54,210.42	54,210.42	54,210.42	Carry Over 501-05
	Interior Doors	1460	90	0.00	54,210.42	54,210.42	54,210.42	100% Complete
MO8-3	DWELLING STRUCTURES	1460		20,000.00	7,102.23	7,102.23	0.00	
	Replace Roof Caps on Parapet	1460	20	20,000.00	7,102.23	7,102.23	0.00	Under Contract
MO8-3	NON DWELLING STRUCTURES	1470		97,486.00	142,473.58	142,473.58	142,473.58	
	Renovate Senior Ctr. Dinning Room	1470	1630 SF	80,486.00	97,000.58	97,000.58	97,000.58	100% Complete
	Renovate Senior Ctr. Bathrooms	1470	312 SF	6,000.00	17,453.00	17,453.00	17,453.00	100% Complete
	Renovate Board Meeting Room	1470	250 SF	3,000.00	13,000.00	13,000.00	13,000.00	100% Complete
	Replace Office Bldg. Exterior Doors	1470	8 Sets	8,000.00	15,020.00	15,020.00	15,020.00	100% Complete
PHA Wide	NON DWELLING EQUIPMENT	1475		20,000.00	0.00	0.00	0.00	
	Replace Riding Lawn Mower	1475	1	20,000.00	0.00	0.00	0.00	
MO8-5	DEMOLITION	1485		10,000.00	4,897.77	4,897.77	4,547.77	
	Demolish 129 Pin Oak Drive	1485	1 DU	10,000.00	4,897.77	4,897.77	4,547.77	92% Complete

7. Capital Fund Program Annual Statement/Performance and Evaluation Report and Replacement Housing Factor

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule							
PHA Name: SIKESTON HOUSING AUTH P.O Box 829 Sikeston, Missouri 63801-0829			Grant Type and Number Capital Fund Program No: MO36-P008-501-06 Replacement Housing Factor No:				Federal FY of Grant: FY 2006
Development Number Name/HA-Wide Activities	All Fund Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
MO8-ALL	07/18/2008			07/18/2010			
PHA WIDE	07/18/2008			07/18/2010			

DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING

The Sikeston Housing Authority (SHA) has adopted a policy to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). The Sikeston Housing Authority's goals, objectives, and policies to enable SHA to serve the needs of child and adult victims of domestic violence, dating violence, and stalking, as defined in VAWA, are stated in the Sikeston Housing Authority Violence Against Women Act (VAWA) Policy below:

In addition:

- A. The following activities, services, or programs are provided by the SHA, directly or in partnership with other service providers, to child and adult victims of domestic violence, dating violence, sexual assault or stalking.
 - 1. Refer victims to Domestic Violence Shelter located in Sikeston.
- B. The following activities, services, or programs are provided by SHA to help child and adult victims of domestic violence, dating violence, sexual assault, or stalking to maintain housing.
 - 1. Refer victims to Domestic Violence Shelter located in Sikeston for qualified assistance or counseling.
- C. The following activities, services, or programs are provided by the SHA to prevent domestic violence, dating violence, sexual assault and stalking, or to enhance victim safety in assisted families.
 - 1. None

SIKESTON HOUSING AUTHORITY (SHA) VIOLENCE AGAINST WOMEN ACT (VAWA) POLICY

I. Purpose and Applicability

The purpose of this policy (herein called "Policy") is to implement the applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) and more generally to set forth SHA's policies and procedures regarding domestic violence, dating violence, and stalking, as hereinafter defined.

This Policy shall be applicable to the administration by SHA of all federally subsidized public housing and Section 8 rental assistance under the United States Housing Act of 1937 (42 U.S.C. 1437 *et seq.*). Notwithstanding its title, this policy is gender-neutral, and its protections are available to males who are victims of domestic violence, dating violence, or stalking as well as female victims of such violence.

II. Goals and Objectives

This Policy has the following principal goals and objectives:

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA;
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by SHA;
- C. Providing and maintaining housing opportunities for victims of domestic violence, dating violence, or stalking; and,

- D. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by SHA.

III. Other SHA Policies and Procedures

This Policy shall be referenced in the SHA's Five-Year and Annual Public Housing Agency Plan and shall be made a part of the SHA's Public Housing Admission and Continued Occupancy Policy and Section 8 Administrative Plan.

To the extent any provision of this policy shall vary or contradict any previously adopted policy or procedure of SHA, the provisions of this Policy shall prevail.

IV. Definitions

As used in this Policy:

A. *Domestic Violence* – The term 'domestic violence' includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

B. *Dating Violence* – means violence committed by a person –

Who is or has been in a social relationship of a romantic or intimate nature with the victim; and,

Where the existence of such relationship shall be determined based on a consideration of the following factors:

- ☐ The length of the relationship.
- ☐ The type of relationship.
- ☐ The frequency of interaction between the persons involved in the relationship.

C. *Stalking* – means –

To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate another person; and to place under surveillance with the intent to kill, injure, harass or intimidate another person; and,

In the course of, or as a result of, such following, pursuit, surveillance or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to –

- ☐ That person;
- ☐ A member of the immediate family of that person; or
- ☐ The spouse or intimate partner of that person.

D. *Immediate Family Member* – means, with respect to a person –

A spouse, parent, brother, sister, or child of that person, or an individual to whom that person stands in loco parentis; or any other person living in the household of that person and related to that person by blood or marriage.

E. *Perpetrator* – means person who commits an act of domestic violence, dating violence or stalking against a victim.

V. Admission and Screening

Non-Denial of Assistance. SHA will not deny admission to public housing or to the Section 8 rental assistance program to any person because that person is or has been a victim of domestic violence, dating violence, or stalking, provided that such person is otherwise qualified for such admission.

Mitigation of Disqualifying Information. When so requested in writing by an applicant for assistance whose history included incidents in which the applicant was a victim of domestic violence, SHA, may but shall not be obligated to, take such information into account in mitigation of potentially disqualifying information, such as previous damage to a dwelling. If requested by an applicant to take such mitigating information into account, SHA shall be entitled to conduct such inquiries as are reasonably necessary to verify the claimed history of domestic violence and its probable relevance to the potentially disqualifying information. SHA will not disregard or mitigate potentially disqualifying information if the applicant household includes a perpetrator of a previous incident or incidents of domestic violence.

VI. Termination of Tenancy or Assistance

VAWA Protections. Under VAWA, public housing residents and persons assisted under the Section 8 rental assistance program have the following specific protections, which will be observed by SHA:

1. An incident or incidents of actual or threatened domestic violence, dating violence, or stalking will not be considered to be a “serious or repeated” violation of the lease by the victim or threatened victim of that violence and will not be good cause for terminating the tenancy or occupancy rights or assistance to the victim of that violence.

2. In addition to the foregoing, tenancy or assistance will not be terminated by SHA as a result of criminal activity, if that criminal activity is directly related to domestic violence, dating violence or stalking engaged in by a member of the assisted household, a guest or another person under the tenant’s control, and the tenant or an immediate family member is the victim or threatened victim of this criminal activity. However, the protection against termination of tenancy or assistance in this paragraph is subject to the following limitations:

- ☐ Nothing contained in this paragraph shall limit any otherwise available authority of SHA’s or a Section 8 owner or manager to terminate tenancy, evict, or to terminate assistance, as the case may be, for any violation of a lease or program requirement not premised on the act or acts of domestic violence, dating violence, or stalking in question against the tenant or a member of the tenant’s household. However, in taking any such action, neither SHA nor a Section 8 owner or manager may apply a more demanding standard to the victim of domestic violence dating violence or stalking than that applied to other tenants.
- ☐ Nothing contained in this paragraph shall be construed to limit the authority of SHA or a Section 8 owner or manager to evict or terminate from assistance any tenant or lawful applicant if the owner, manager or SHA, as the case may be, can demonstrate an actual and imminent threat to other tenants or to those employed at or providing service to the property, if the tenant is not evicted or terminated from assistance

Removal of Perpetrator. SHA or a Section 8 owner or manager, as the case may be, may bifurcate (divide into branches) a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in acts of physical violence against family members or others. Such action against the perpetrator of such physical violence may be taken without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also the tenant or a lawful occupant. Such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by law applicable to terminations of tenancy and evictions by SHA.

VII. Verification of Domestic Violence, Dating Violence or Stalking

Requirements for Verification. The law allows, but does not require, SHA or a Section 8 owner or manager to verify that an incident or incidents of actual or threatened domestic violence, dating violence, or stalking claimed by a tenant or other lawful occupant is bona fide and meets the requirements of the applicable definitions set forth in this policy. Subject only to waiver as provided in this Section, SHA shall require verification in all cases where an individual claims protection against an action involving such individual proposed to be taken by SHA. Section 8 owners or managers receiving rental assistance administered by SHA may elect to require verification, or not to require it as permitted under applicable law.

Verification of a claimed incident or incidents of actual or threatened domestic violence, dating violence or stalking may be accomplished in one of the following three ways:

1. *HUD-approved form* – by providing to SHA or to the requesting Section 8 owner or manager a written certification, on a form (form HUD-50066 attached) approved by the U.S. Department of Housing and Urban Development (HUD), that the individual is a victim of domestic violence, dating violence or stalking that the incident or incidents in question are bona fide incidents of actual or threatened abuse meeting the requirements of the applicable definition(s) set forth in the policy. The incident or incidents in question must be described in reasonable detail as required in the HUD-approved form, and the completed certification must include the name of the perpetrator.
2. *Other documentation* – by providing to SHA or to the requesting Section 8 owner or manager documentation signed by an employee, agent, or volunteer of a victim service provider, an attorney, or a medical professional, from whom the victim has sought assistance in addressing the domestic violence, dating violence or stalking, or the effects of the abuse, described in such documentation. The professional providing the documentation must sign and attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse meeting the requirements of the applicable definition(s) set forth in this policy. The victim of the incident or incidents of domestic violence, dating violence or stalking described in the documentation must also sign and attest to the documentation under penalty of perjury.
3. *Police or court record* – by providing to SHA or to the requesting Section owner or manager a Federal, State, tribal, territorial, or local police or court record describing the incident or incidents in question.

Time allowed to provide verification or failure to provide. An individual who claims protection against adverse action based on an incident or incidents of actual or threatened domestic violence, dating violence or stalking, and who is requested by SHA, or a Section 8 owner or manager to provide verification, must provide such verification within 14 business days after receipt of the request for verification. Failure to provide verification, in proper form within such time will result in loss of protection under VAWA and this policy against a proposed adverse action.

Waiver of verification requirement. The Executive Director of the SHA, or a Section 8 owner or manager, may, with respect to any specific case, waive the above-stated requirements for verification and provide the benefits of this policy based on the victim's statement or other corroborating evidence. Such waiver may be granted in the sole discretion of the Executive Director, owner, or manager. Any such waiver must be in writing. Waiver in a particular instance or instances shall not operate as precedent for, or create any right to, waiver in any other case or cases, regardless of similarity in circumstances.

VIII. Confidentiality

Right of confidentiality. All information (including the fact that an individual is a victim of domestic violence, dating violence or stalking) provided to SHA or to a Section 8 owner or manager in connection with a verification required in this policy or provided in lieu of such verification where a waiver of verification is granted, shall be retained by the receiving party in confidence and shall neither be entered in any shared database nor provided to any related entity, except where disclosure is:

- ☐ Requested or consented to by the individual in writing, or
- ☐ Required for use in a public housing eviction proceeding or in connection with termination of Section 8 assistance, as permitted in VAWA, or
- ☐ Otherwise required by applicable law.

Notification of rights. All tenants of public housing and tenants participating in the Section 8 rental assistance program administered by SHA shall be notified in writing concerning their right to confidentiality and the limits on such rights of confidentiality.

IX. Transfer to New Residence

No right to transfer. SHA will make every effort to accommodate request for transfer when suitable alternative vacant units are available and the circumstances warrant such action. However, except with respect to portability of Section 8 assistance as provided below, the decision to grant or refuse to grant a transfer in public housing shall lie within the sole discretion of SHA, and this policy does not create and right on the part of any tenant to be granted a transfer.

Section 8 portability. Notwithstanding the foregoing, a Section 8 assisted tenant will not be denied portability to a unit located in another jurisdiction (notwithstanding the term of the tenant's existing lease has not expired, or the family has not occupied the unit for 12 months) so long as the tenant has complied with all other requirements of the Section 8 program and has moved from the unit in order to protect the health or safety of an individual member of the household who is or has been a victim of domestic violence, dating violence or stalking and who reasonably believes that the tenant or other household member will be imminently threatened by harm from further violence if the individual remains in the present dwelling unit.

X. Court Orders

Court orders. It is SHA's policy to honor orders entered by courts of competent jurisdiction affecting individual assisted by SHA and their property. This includes cooperating with law enforcement authorities to enforce civil protection orders issued for the protection of victims and addressing the distribution of personal property among household members in the cases where a family breaks up.

XI. Relationship with Service Providers

SHA may cooperate with organizations and entities, both private and governmental, which provide shelter and/or services to victims of domestic violence. If SHA staff become aware that an individual assisted by SHA is a victim of domestic violence, dating violence or stalking, SHA will refer the victim to such providers of shelter or services as appropriate. This Policy does not create any legal obligation requiring SHA either to maintain a relationship with any particular provider or shelter or services to victims of domestic violence or to make a referral in any particular provider of shelter or services to victims of domestic violence or to make referral in any particular case.

XII. Notification

SHA shall provide, when necessary, written notification to applicants, tenants, and Section 8 owners and managers, concerning the rights and obligations created under VAWA relating to confidentiality, denial or assistance and, termination of tenancy or assistance.

XIII. Relationship with Other Applicable Laws

Neither VAWA nor this Policy implementing it shall preempt or supersede any provision of Federal, State or local law that provides greater protection than that provided under VAWA for victims of domestic violence, dating violence or stalking.

XIV. Amendment

This Policy may be amended from time to time by SHA as approved by the SHA Board of Commissioners.

This Policy adopted by Resolution No. 608, March 12, 2007.

SIKESTON HOUSING AUTHORITY (SHA)
CERTIFICATION FORM (form HUD-50066)
FOR TENANTS OF
DOMESTIC VIOLENCE, DATING VIOLENCE OR STALKING
UNDER THE
VIOLENCE AGAINST WOMEN ACT (VAWA)

1. The Violence Against Women Act, 42 U.S.C. 13701, requires a tenant who is claiming they are a victim of domestic violence, dating violence or stalking (abuse) to certify that the incident or incidents are bona fide incidents of actual or threatened abuse.
2. The certification may include federal, state, tribal, territorial or local police or court records.
3. The certification may also include a document signed by an employee, agent or volunteer of victim service provider, an attorney or a medical professional (professional) from whom the victim has sought assistance in addressing the abuse or the affects of abuse.
4. The professional must attest to the certification under penalty of perjury (26 U.S.C. 1746) that the incident or incidents are bona fide incidents or actual or threatened abuse. The professional should identify their name, title, address and phone number and the name of the perpetrator.
5. You must return a complete and fully signed certification document with other documents in available to the SHA within 14 business days from the date of SHA's Notice of Public Housing Lease Termination or Notice of Section 8 Rental Assistance Termination.
6. If you do not certify the incident or incidents of abuse within the 14 business days, the Violence Against Women Act does not limit SHA from taking action to terminate your lease or assistance.
7. SHA will not disclose the information you provide on the certification form without your written consent except for use in an eviction process or as required by law.
8. Please return the attached certification to: Sikeston Housing Authority
P.O. Box 829
400 Allen Boulevard
Sikeston, Missouri 63801

Form HUD-50066 maybe obtained from www.hudclips.org